

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2554 / 5211

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

A. Full Name (Last, First, Middle Initial) Dr. Virginia Y. Blackledge Mailing Address 663 Coventry Road City State Zip Code Kensington CA 94707 FEC ID number of contributing federal political committee. C Name of Employer Self Occupation Psychiatrist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6 Transaction ID: 2104207 Amount of Each Receipt this Period 1000.00
B. Full Name (Last, First, Middle Initial) Mrs. June Weisberger Blanchard Mailing Address 2021 Van Hise Avenue City State Zip Code Madison WI 53726 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 0 / 2 0 0 6 Transaction ID: 2113094 Amount of Each Receipt this Period 100.00
C. Full Name (Last, First, Middle Initial) Mr. Frank P. Bland Mailing Address 1420 Highland Drive City State Zip Code Silver Spring MD 20910 FEC ID number of contributing federal political committee. C Name of Employer Trial Lawyers for Public Justice Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 8 / 2 0 0 6 Transaction ID: 2100045 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)